

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 7-14-05

2 Serial/Patent # 10/519172

3 Please refund the following fee(s):

	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/> Filing	1	12/20/04	\$ 100
<input type="checkbox"/> Amendment			\$
<input type="checkbox"/> Extension of Time			\$
<input type="checkbox"/> Notice of Appeal/Appeal			\$
<input type="checkbox"/> Petition			\$
<input type="checkbox"/> Issue			\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/> Maintenance			\$
<input type="checkbox"/> Assignment			\$
<input type="checkbox"/> Other			\$

7 TOTAL AMOUNT
OF REFUND

\$ 100

10 REASON:

8 TO BE REFUNDED BY:

☒ Overpayment

Treasury Check

☐ Duplicate Payment

Credit Deposit A/C #:

☐ No Fee Due (Explanation):

9 06--1050

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: A. Johnson

SIGNATURE: A. Johnson

TITLE: paralegal

OFFICE: PCT

PHONE: 308-9940

THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED: _____

DATE: _____

Instructions for completion of this form appear on the back. After completion, attach
white and yellow copies to the official file and mail or hand-carry to: